Case 17-10098-BFK Doc 14 Filed 02/14/17 Entered 02/14/17 12:32:58 Desc Main

	Document Page 1	of 54	2 000 1110
Fill in this information to identif	y your case and this filing:		
Debtor 1 <u>Trina</u>	A. Lloyd		
First Name M	Middle Name Last Name		
Debtor 2 (Spouse, if filing) First Name N	fliddle Name Last Name		
United States Bankruptcy Court for the:	ASTERN DISTRICT OF VIRGINIA		
Case number (if known) 17-10098-BFK			if this is an led filing
Official Form 106A/B			
Schedule A/B: Property			12/15
Part 1: Describe Each Reside	ible for supplying correct information. If more ditional pages, write your name and case numence, Building, Land, or Other Real Equitable interest in any residence, building, land	ber (if known). Answer eve	ry question.
1.1. 15047 Holleyside Dr, Dumfries, VA 22025 15407 Holleyside Dr., Dumfries, VA 22025 Value per Zillow Actual value = \$335,000.00 Less Liens of \$314,210.97 Less cost of sale of \$33,500 Leaves value to the estate of \$0	What is the property? Check all that apply. ☑ Single-family home ☐ Duplex or multi-unit building ☐ Condominium or cooperative ☐ Manufactured or mobile home ☐ Land ☐ Investment property ☐ Timeshare ☐ Other ☐ Who has an interest in the property? Check one.	Do not deduct secured clai amount of any secured clai Creditors Who Have Claim Current value of the entire property? \$335,000.00 Describe the nature of yo interest (such as fee simple retired)	ims on Schedule D: as Secured by Property. Current value of the portion you own? \$335,000.00 our ownership ole, tenancy by the
	 ✓ Debtor 1 only ✓ Debtor 2 only ✓ Debtor 1 and Debtor 2 only ✓ At least one of the debtors and anothe 	Check if this is comm (see instructions)	nunity property
	Other information you wish to add abou property identification number:	t this item, such as local	_
	you own for all of your entries from Part 1, inc I for Part 1. Write that number here		\$335,000.00
Prince William County 2. Add the dollar value of the portion y entries for pages you have attached Part 2: Describe Your Vehicle Do you own, lease, or have legal or equivou own that someone else drives. If you leave	Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and anothe Other information you wish to add abour property identification number: You own for all of your entries from Part 1, inc. If for Part 1. Write that number here	(see instructions) r t this item, such as local luding any e registered or not? Include	\$335,000
3. Cars, vans, trucks, tractors, sport u	tility vehicles, motorcycles		
☑ No ☐ Yes			

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Deb	tor 1	Trina A. Lloyd	Case number (if known) _	17-10098-BFK
4.		raft, aircraft, motor homes, ATVs and other recreational vehicles, other ves: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles		s
5.	Add the	e dollar value of the portion you own for all of your entries from Part 2, ir for pages you have attached for Part 2. Write that number here		\$0.00
Pa	art 3:	Describe Your Personal and Household Items		
		or have any legal or equitable interest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
6.		nold goods and furnishings es: Major appliances, furniture, linens, china, kitchenware		
	_	Describe See continuation page(s).		\$3,000.00
7.	Electro Exampl	nics es: Televisions and radios; audio, video, stereo, and digital equipment; comp music collections; electronic devices including cell phones, cameras, me	•	
	□ No ✓ Yes	. Describe Entertainment & Electronics		\$900.00
8.		ibles of value es: Antiques and figurines; paintings, prints, or other artwork; books, pictures stamp, coin, or baseball card collections; other collections, memorabilia,		
	✓ No ☐ Yes	s. Describe		
9.		nent for sports and hobbies es: Sports, photographic, exercise, and other hobby equipment; bicycles, pocanoes and kayaks; carpentry tools; musical instruments	ol tables, golf clubs, skis;	
	✓ No ☐ Yes	s. Describe		
10.	Firearm Exampl	ns es: Pistols, rifles, shotguns, ammunition, and related equipment		
	✓ No ☐ Yes	s. Describe		
11.		s es: Everyday clothes, furs, leather coats, designer wear, shoes, accessories		
	☐ No ✓ Yes	s. Describe See continuation page(s).		\$2,700.00
12.	Jewelry Exampl	 es: Everyday jewelry, costume jewelry, engagement rings, wedding rings, he gold, silver 	irloom jewelry, watches, g	ems,
	□ No ✓ Yes	Describe See continuation page(s).		\$3,500.00
13.		rm animals es: Dogs, cats, birds, horses		
	✓ No ☐ Yes	s. Describe		

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Deb	tor 1 <u>T</u>	rina A. Lloyd	Case number (if known) _ 17-1	0098-BFK				
14.	-	Any other personal and household items you did not already list, including any health aids you did not list						
	✓ No	Civa aposifia						
		Give specific						
15.			f your entries from Part 3, including any entries for pages you have the number here	\$10,100.00				
P	art 4:	Describe Your	Financial Assets					
			equitable interest in any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.				
16.	Cash Examples	: Money you have i petition	n your wallet, in your home, in a safe deposit box, and on hand when you file your					
	☐ No ✓ Yes		Cash:	\$100.00				
17.	Deposits <i>Examples</i>							
	□ No ✓ Yes		Institution name:					
	17.1.	Checking accou	LGE Community Credit Union Checking account ending in 6751	\$25.00				
	17.2.	Checking accou	nt: NFCU Checking account ending in 3072	\$25.00				
	17.3.	Checking accou	nt: USAA Checking account ending in 3191	\$10.00				
	17.4.	Checking accou	nt: Paypal Business Checking Account	\$0.00				
	17.5.	Savings accour	LGE Community Credit Union Savings account ending in 6210	\$5.00				
	17.6	Savings accour	NFCU Savings account ending in 9407	\$5.00				
	17.7.	Savings accour	t: USAA Savings account ending in 4432	\$5.00				
18.			blicly traded stocks stment accounts with brokerage firms, money market accounts					
	✓ No ☐ Yes	1	nstitution or issuer name:					
19.	-	-	nd interests in incorporated and unincorporated businesses, including ership, and joint venture					
	inform	Give specific nation about	Name of entity: % of ownership:					
20.	Negotiabl	e instruments includ	bonds and other negotiable and non-negotiable instruments de personal checks, cashiers' checks, promissory notes, and money orders. re those you cannot transfer to someone by signing or delivering them.					
	inform	Give specific nation about	ssuer name:					

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Peter Retirement account: Divorce QDRO retirement from ex \$29,000 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others No	Deb	otor 1	Trina A. Lloyd		Case number (i	if known) 17-10	0098-BFK
Yes. List each account separately. Type of account: Institution name: IRA: Ameriprise IRA \$1,956 Retirement account: Divorce QDRO retirement from ex \$29,000 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company *Examples**. Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others No Institution name or individual: 23. Annuties (A contract for a specific periodic payment of money to you, either for life or for a number of years) No Ves. Issuer name and description: 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 2e U.S.C. § \$30(b)(1), \$29A(b), and \$29(b)(1). No Ves. Institution name and description. Separately file the records of any interests. 11 U.S.C. § \$21(c) 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit No Ves. Give specific information about them 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property; *Examples*: Internet domain names, websites, proceeds from royalties and licensing agreements No Ves. Give specific information about them 27. Licenses, franchises, and other general intangibles *Examples*: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses No No Ves. Give specific information about them Money or property owed to you? **Current value of the portlon you own? Do not deduct seed.	21.		es: Interests in IR.	A, ERISA, Keogh, 401((k), 403(b), thrift savings accounts, or other pension	n or	
22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others No		☑ Yes			Ameriprise IRA		\$1,956.68
Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others No				Retirement account:	Divorce QDRO retirement from ex		\$29,000.00
Yes	22.	Your sh Exampl	are of all unused on the contract of all unused on the contract of all unused on the contract of the contract	deposits you have made			
No		-	·	In	stitution name or individual:		
26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). No Separately file the records of any interests. 11 U.S.C. § 521(c) 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit No Yes. Give specific information about them 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property; Examples: Internet domain names, websites, proceeds from royalties and licensing agreements No Yes. Give specific information about them 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses No Yes. Give specific information about them Money or property owed to you? Current value of the portion you own? Do not deduct secu	23.	☑ No				er of years)	
Yes	24.				n a qualified ABLE program, or under a qualified	state tuition pro	ogram.
powers exercisable for your benefit No Yes. Give specific information about them 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property; Examples: Internet domain names, websites, proceeds from royalties and licensing agreements No Yes. Give specific information about them 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses No Yes. Give specific information about them Money or property owed to you? Current value of the portion you own? Do not deduct secu			i	Institution name and	description. Separately file the records of any inte	erests. 11 U.S.C.	§ 521(c)
Yes. Give specific information about them 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property; Examples: Internet domain names, websites, proceeds from royalties and licensing agreements No Yes. Give specific information about them 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses No Yes. Give specific information about them Money or property owed to you? Current value of the portion you own? Do not deduct security.	25.		•		ty (other than anything listed in line 1), and right	ts or	
Examples: Internet domain names, websites, proceeds from royalties and licensing agreements No Yes. Give specific information about them 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses No Yes. Give specific information about them Money or property owed to you? Current value of the portion you own? Do not deduct secu		Yes		m			
Yes. Give specific information about them 27. Licenses, franchises, and other general intangibles	26.						
Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses No Yes. Give specific information about them Money or property owed to you? Current value of the portion you own? Do not deduct secu		Yes		m			
Yes. Give specific information about them Money or property owed to you? Current value of the portion you own? Do not deduct secure.	27.					professional licen	ses
portion you own? Do not deduct secu		Yes		m			
	Моі	ney or pr	operty owed to y	ou?			Current value of the portion you own? Do not deduct secured claims or exemptions.
28. Tax refunds owed to you	28.		unds owed to you	1			
✓ No ☐ Yes. Give specific information Federal:			Give specific inf	formation		Faderal	
about them, including whether		abo	ut them, including	whether			•
you already filed the returns and the tax years Local:		-	-				

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Deb	tor 1 Trina A. Lloyd Case numb	er (if known)17-1	0098-BFK
29.	Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce	a sattlament nronari	ay sattlament
	No ✓ Yes. Give specific information	Alimony:	\$0.00
	Support: Receiving monthly back child support through Chapter 13 Trustee	Maintenance:	\$0.00
	in Alabama. Amt: \$360.00	Support:	\$360.00
		Divorce settlement	
		Property settlemen	
30.	Other amounts someone owes you	.,,	-
	Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation compensation, Social Security benefits; unpaid loans you made to someone else	pay, workers'	
	✓ No✓ Yes. Give specific information		
31.	Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowners	er's, or renter's insura	ance
	No Nome the incurence		
	Yes. Name the insurance company of each policy and list its value Company name: Beneficiary:	Si	urrender or refund value:
32.	Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are cuentitled to receive property because someone has died	urrently	
	No✓ Yes. Give specific information Inchoate Inheritance		\$1.00
33.	Claims against third parties, whether or not you have filed a lawsuit or made a demand fo Examples: Accidents, employment disputes, insurance claims, or rights to sue	r payment	
	✓ No ☐ Yes. Describe each claim		
34.	Other contingent and unliquidated claims of every nature, including counterclaims of the rights to set off claims $\frac{1}{2}$	debtor and	
	✓ No Yes. Describe each claim		
35.	Any financial assets you did not already list		
	✓ No ☐ Yes. Give specific information		
36.	Add the dollar value of all of your entries from Part 4, including any entries for pages you attached for Part 4. Write that number here	_	\$31,492.68
Pa	art 5: Describe Any Business-Related Property You Own or Have an Inter	est In. List any	real estate in Part 1.
37.	Do you own or have any legal or equitable interest in any business-related property?		
	■ No. Go to Part 6.		
	Yes. Go to line 38.		
			Current value of the portion you own? Do not deduct secured claims or exemptions.
38.	Accounts receivable or commissions you already earned		
	✓ No ☐ Yes. Describe		

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Deb	otor 1 Trina A. Lloyd	Case number (if known)17-10	098-BFK
39.	Office equipment, furnishings, and supplies Examples: Business-related computers, software, modems, printed desks, chairs, electronic devices	ers, copiers, fax machines, rugs, telephones,	
	✓ No ✓ Yes. Describe		
40.	Machinery, fixtures, equipment, supplies you use in business	, and tools of your trade	
	☐ No ☑ Yes. Describe Tools & Materials used as a freelance	e artist	\$2,500.00
41.	Inventory		
	✓ No Yes. Describe		
42.	Interests in partnerships or joint ventures		
	✓ No ☐ Yes. Describe Name of entity:	% of ownership:	
43.	Customer lists, mailing lists, or other compilations		
	No Yes. Do your lists include personally identifiable informat No Yes. Describe	ion (as defined in 11 U.S.C. § 101(41A))?	
44.	Any business-related property you did not already list		
	✓ No✓ Yes. Give specific information.		
45.	Add the dollar value of all of your entries from Part 5, includin attached for Part 5. Write that number here		\$2,500.00
Pa	art 6: Describe Any Farm- and Commercial Fishing If you own or have an interest in farmland, list it i		Interest In.
46.	Do you own or have any legal or equitable interest in any farm	n- or commercial fishing-related property?	
	No. Go to Part 7.		
	Yes. Go to line 47.		
47	Form onimals		Current value of the portion you own? Do not deduct secured claims or exemptions.
47.	Farm animals Examples: Livestock, poultry, farm-raised fish		
	✓ No ☐ Yes		
48.	Crops-either growing or harvested		
	✓ No Yes. Give specific information		
49.	Farm and fishing equipment, implements, machinery, fixtures,	, and tools of trade	
	✓ No ☐ Yes		

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Debi	otor 1 Trina A. Lloyd	Case number (if known)	17-10098-BFK				
50.	Farm and fishing supplies, chemicals, and feed						
	✓ No ☐ Yes						
51.	Any farm- and commercial fishing-related property you did no	ot already list					
	✓ No ✓ Yes. Give specific information						
52.	Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here						
Pa	art 7: Describe All Property You Own or Have an I	nterest in That You Did Not List	Above				
53.	Do you have other property of any kind you did not already list Examples: Season tickets, country club membership	st?					
	✓ No✓ Yes. Give specific information.						
54.	Add the dollar value of all of your entries from Part 7. Write t	hat number here	→ \$0.00				
Pa	art 8: List the Totals of Each Part of this Form						
55.	Part 1: Total real estate, line 2		\$335,000.00				
56.	Part 2: Total vehicles, line 5	\$0.00					
57.	Part 3: Total personal and household items, line 15	\$10,100.00					
58.	Part 4: Total financial assets, line 36	\$31,492.68					
59.	Part 5: Total business-related property, line 45	\$2,500.00					
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00					
61.	Part 7: Total other property not listed, line 54	+\$0.00					
62.	Total personal property. Add lines 56 through 61	\$44,092.68 Copy personal property total	- 644 000 00				
63.	Total of all property on Schedule A/B. Add line 55 + line 62		\$379,092.68				

Deb	otor 1 Trina A. Lloyd	Case number (if known)17-10098-BFK		
6.	Household goods and furnishings (details):			
	Art	\$1,500.00		
	Kitchen & Dining Items	\$1,100.00		
	Bedroom Items	\$400.00_		
11.	Clothes (details):			
	Clothing	\$1,200.00_		
	Shoes/Handbags	\$1,500.00_		
12.	Jewelry (details):			
	Wedding & Engagement Jewelry	\$1,500.0 <u>0</u>		
	Costume Jewelry	\$1,000.00_		
	Valuable Jewelry	\$1,000.00_		

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	Case	T1-10090-DL		Document Doc	an 0 of 5/	LZ.32.30 DE
	Fill in this info	ormation to ident		Document Pag	<u>ue 9</u> 01 54	
	Debtor 1	Trina	Α.	Lloyd		
		First Name	Middle Name	Last Name		
	Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the: EASTERN DISTRICT OF VIRGINIA						Check if this is an
	Case number (if known)	17-10098-BFK				amended filing
(Official Form	106C				
(;	Schedule C:	The Property	You Claim	n as Exempt		

ed filing

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions--such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds--may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)							
2. For any property you list on <i>Schedule A/B</i> Brief description of the property and line on <i>Schedule A/B</i> that lists this property	that you claim as exer Current value of the portion you own	npt, fill in the informatio Amount of the exemption you claim	n below. Specific laws that allow exemption				
	Copy the value from Schedule A/B	Check only one box for each exemption					
Brief description: Art Line from Schedule A/B: 6	\$1,500.00	\$1,500.00 100% of fair marke value, up to any applicable statutory limit					
Brief description: Kitchen & Dining Items Line from Schedule A/B: 6	\$1,100.00	\$1,100.00 100% of fair marke value, up to any applicable statutory limit					
Brief description: Bedroom Items Line from Schedule A/B: 6	\$400.00	\$400.00 100% of fair marked value, up to any applicable statutory limit					
3. Are you claiming a homestead exemption of (Subject to adjustment on 4/01/19 and every 3 No Yes. Did you acquire the property covered No Yes	3 years after that for cas	ses filed on or after the da	,				

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Debtor 1 Trina A. Lloyd Case number (if known) 17-10098-BFK Part 2: **Additional Page** Brief description of the property and line on **Current value of** Amount of the Specific laws that allow exemption Schedule A/B that lists this property exemption you claim the portion you Copy the value from Check only one box for Schedule A/B each exemption Brief description: \$900.00 \$900.00 Va. Code Ann. § 34-26(4a) **Entertainment & Electronics** 100% of fair market value, up to any Line from Schedule A/B: 7 applicable statutory limit Brief description: \$1,200.00 \$1,000.00 Va. Code Ann. § 34-26(4) \checkmark Clothing 100% of fair market value, up to any Line from Schedule A/B: 11 applicable statutory limit Brief description: Va. Code Ann. § 34-26(4) \$1,500.00 \$0.00 $oldsymbol{
abla}$ Shoes/Handbags 100% of fair market value, up to any Line from Schedule A/B: 11 applicable statutory limit Brief description: \$1,500.00 \$1,500.00 Va. Code Ann. § 34-26(1a) \square **Wedding & Engagement Jewelry** 100% of fair market value, up to any Line from Schedule A/B: 12 applicable statutory limit Brief description: \$1,000.00 \$1,000.00 Va. Code Ann. § 34-4 $\overline{\mathbf{A}}$ Costume Jewelry 100% of fair market value, up to any Line from Schedule A/B: 12 applicable statutory limit Brief description: \$1,000.00 \$1,000.00 Va. Code Ann. § 34-4 $\mathbf{\Delta}$ Valuable Jewelry 100% of fair market value, up to any Line from Schedule A/B: 12 applicable statutory limit Brief description: \$100.00 \$100.00 Va. Code Ann. § 34-4 $oldsymbol{
abla}$ Cash on hand 100% of fair market value, up to any Line from Schedule A/B: 16 applicable statutory limit Brief description: \checkmark \$25.00 \$25.00 Va. Code Ann. § 34-4 **LGE Community Credit Union Checking** 100% of fair market account ending in 6751 value, up to any applicable statutory Line from Schedule A/B: 17.1 limit Brief description: \$25.00 Va. Code Ann. § 34-4 \$25.00 $oldsymbol{\Lambda}$ NFCU Checking account ending in 3072 100% of fair market value, up to any Line from Schedule A/B: 17.2 applicable statutory limit

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Debtor 1 Trina A. Lloyd Case number (if known) 17-10098-BFK Part 2: **Additional Page** Brief description of the property and line on Current value of Amount of the Specific laws that allow exemption Schedule A/B that lists this property exemption you claim the portion you Copy the value from Check only one box for Schedule A/B each exemption Brief description: \$10.00 \$10.00 Va. Code Ann. § 34-4 **USAA Checking account ending in 3191** 100% of fair market value, up to any Line from Schedule A/B: 17.3 applicable statutory limit Brief description: \$0.00 \$0.00 Va. Code Ann. § 34-4 \checkmark **Paypal Business Checking Account** 100% of fair market value, up to any Line from Schedule A/B: 17.4 applicable statutory limit Brief description: \$5.00 Va. Code Ann. § 34-4 \$5.00 $oldsymbol{
abla}$ **LGE Community Credit Union Savings** 100% of fair market account ending in 6210 value, up to any applicable statutory Line from Schedule A/B: 17.5 limit Brief description: \$5.00 \$5.00 Va. Code Ann. § 34-4 \square NFCU Savings account ending in 9407 100% of fair market П value, up to any Line from Schedule A/B: 17.6 applicable statutory limit Brief description: \$5.00 \$5.00 Va. Code Ann. § 34-4 $\overline{\mathbf{A}}$ **USAA Savings account ending in 4432** 100% of fair market value, up to any Line from Schedule A/B: 17.7 applicable statutory limit Brief description: \$1,956.68 \$1,956.68 Va. Code Ann. § 34-34 $\mathbf{\Delta}$ **Ameriprise IRA** 100% of fair market value, up to any Line from Schedule A/B: 21 applicable statutory limit Brief description: \$29,000.00 \$29,000.00 Va. Code Ann. § 34-34 $oldsymbol{
abla}$ Divorce QDRO retirement from ex 100% of fair market value, up to any Line from Schedule A/B: 21 applicable statutory limit Brief description: \$360.00 Va. Code Ann. § 20-108.1(G) \checkmark \$360.00 Receiving monthly back child support 100% of fair market through Chapter 13 Trustee in Alabama value, up to any applicable statutory Line from Schedule A/B: 29 limit Brief description: \$1.00 Va. Code Ann. § 34-4 \$1.00 $oldsymbol{\Lambda}$ Inchoate Inheritance 100% of fair market value, up to any Line from Schedule A/B: 32 applicable statutory limit

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Debtor 1	Trina A. Lloyd			Case number (if known)17-10098-BFK		
Part 2:	Additional Page					
	iption of the property and line on I/B that lists this property	Current value of the portion you own		ount of the mption you claim	Specific laws that allow exemption	
		Copy the value from Schedule A/B		ck only one box for n exemption		
artist	otion: laterials used as a freelance chedule A/B:40	\$2,500.00		\$2,500.00 100% of fair market value, up to any applicable statutory limit	Va. Code Ann. § 34-26(7)	

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0030 17	10030 DI IX		ocument Pag	ge 13 of 54	+/11 12.02.00	Desc Main
Fill in this informa	tion to ident	ify your case	:			
Debtor 1 Trin	a	A.	Lloyd			
First N	lame	Middle Name	Last Name			
Debtor 2 (Spouse, if filing) First N	lame	Middle Name	Last Name			
United States Bankrupt	cy Court for the:	EASTERN DIS	TRICT OF VIRGINIA			
Case number (if known) 17-10098-BFK Check if this is an						s an
(ii raioiii)					amended filing	j
Official Form 106	<u>D</u>					
Schedule D: Cre	ditors Wh	o Have Cla	ims Secured by	/ Property		12/15
Column A Creditor space claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the claims in alphabetical order according to the contact of the contact of the contact of the creditor's name. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. It out, number the entries, and attach it to this form. It is out, number the entries, and attach it to this form. It is out, number the entries, and attach it to this form. Column B Column B Value of collateral that supports this claim If any						
2.1		secures the	property that claim:	\$1,990.00	\$335,000.00	
Montclair POA Creditor's name		— 15407 Holle	-			
3561 Waterway Dr Number Street		Dumfries, \	/A 22025			
Number Officer		As of the dat	e you file, the claim is:	Check all that apply.		
Dumfries VA City Stat		_ Unliquida	ted			
Who owes the debt? C		☐ Disputed	a. Obsali all that areali.			
Debtor 1 only			 Check all that apply. ment you made (such as 	s mortgage or secured	car loan)	
Debtor 2 only		_	lien (such as tax lien, m		Jan 19411)	
Debtor 1 and Debtor		Judamen	t lien from a lawsuit	,		
At least one of the de		er 🔽 Other (ind	cluding a right to offset)			
Check if this claim in to a community deb		НОА				

Add the dollar value of your entries in Column A on this page. Write that number here:

Last 4 digits of account number

\$1,990.00

Date debt was incurred

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I rina A. Lioya		Case number (if	known) <u>17-10098-E</u>	3FK
Additional Page Part 1: After listing any entries on this page, number them sequentially from the previous page.		Column A Amount of claim Do not deduct the value of collateral	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
2.2 Describe the property that secures the claim: Selene Finance Creditor's name 120 GIBRALTAR RD STE 300 Number Street Describe the property that secures the claim: 15407 Holleyside Dr., Dumfries, VA 22025		\$312,960.97	\$335,000.00	
HORSHAM PA 19044 City State ZIP Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt	As of the date you file, the claim is: Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as Statutory lien (such as tax lien, many Judgment lien from a lawsuit Other (including a right to offset) 1st Mortgage	s mortgage or secured	car loan)	
Date debt was incurred				

Add the dollar value of your entries in Column A on this page. Write that number here:

\$312,960.97

If this is the last page of your form, add the dollar value totals from all pages. Write that number here:

\$314,950.97

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Debtor 1	Trina A. Lloyd			Case number (if known) 17-10098-BFK
Part 2:	List Others to Be Notified	for a	Debt That You	Already Listed
example, i hen list th	f a collection agency is trying to coll ne collection agency here. Similarly, ditional creditors here. If you do not	lect fro	m you for a debt y have more than o	otcy for a debt that you already listed in Part 1. For you owe to someone else, list the creditor in Part 1, and ne creditor for any of the debts that you listed in Part 1, so to be notified for any debts in Part 1, do not fill out or
1 <u>B\</u>	WW Law Group, LLC/Selene Fin			On which line in Part 1 did you enter the creditor?
	me 103 Executive Blvd Ste 101			Last 4 digits of account number 8 4 4 4
Nu —	mber Street			_
— Ro	ockville	MD	20852	_
City	у	State	ZIP Code	_
2 <u>Se</u>	egan Mason & Mason PC/Montcla	air PO	A	On which line in Part 1 did you enter the creditor?
	me 110 Little River Turnpike #270			Last 4 digits of account number
	mber Street			_
 Δr	nnandale	VA	22003	_
City		State	ZIP Code	-

	Case	17-10098-BFI		Filed 02/14/17 Document Pa	Enter oe 16 o	ed 02/14/17 f 54	12:32:58 °É	2/14/2017 12:04:0 Desc Main
F	ill in this inf	ormation to iden						
D	ebtor 1	Trina First Name	A. Middle Name	Lloyd Last Name				
	ebtor 2 Spouse, if filing)	First Name	Middle Name	Last Name				
Uı	nited States Ba	nkruptcy Court for the	: EASTERN DI	STRICT OF VIRGINIA				
_	ase number known)	17-10098-BFK					Check if this is a amended filing	an
	ficial Form		Mba Haya I	In a course of Oleim				40/45
50	neaule E	F: Creditors v	wno Have u	Jnsecured Clain	ıs			12/15
Do If m to t	not include an ore space is n his page. On t	y creditors with part leeded, copy the Par	ially secured cla t you need, fill it onal pages, write	I on Schedule G: Execute aims that are listed in Scanout, number the entries be your name and case not cared Claims	hedule D: in the box	Creditors Who Hoxes on the left. At	old Claims Secur	ed by Property.
1.	Do any credi	tors have priority un	secured claims	against you?				
	☐ No. Go	to Part 2.						
2.	claim. For ea show both pri- more space is	ch claim listed, identifority and nonpriority a	fy what type of cla mounts. As much nsecured claims,	ditor has more than one paim it is. If a claim has both as possible, list the clair fill out the Continuation P	th priority a	and nonpriority amo abetical order acco	ounts, list that clair	n here and or's name. If
	(For an explai	nation of each type of	claim, see the in	structions for this form in	the instruct		Duianity	Nonnuiouit
						Total claim	Priority amount	Nonpriority amount
2	2.1					\$1,400.00	\$1,400.00	\$0.00
		d Incolvency On						

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Debtor 1 Trina A. Lloyd	Case number (if known)	17-10098-BF	K
Part 1: Your PRIORITY Unsecured C	laims Continuation Page		
After listing any entries on this page, number the previous page.	m sequentially from the Total claim	Priority amount	Nonpriority amount
2.2	\$997.00	\$997.00	\$0.00
IRS- Centralized Insolvency Op. Priority Creditor's Name	Last 4 digits of account number		
PO Box 7346	When was the debt incurred? 2012		
Number Street			
	- As of the date you file, the claim is: Check all that apply	y .	
	Contingent Unliquidated		
Philadelphia PA 19101-7346 City State ZIP Code	_ Disputed		
Who incurred the debt? Check one.	Type of PRIORITY unsecured claim:		
Debtor 1 only	Domestic support obligations		
Debtor 2 only Debtor 1 and Debtor 2 only	Taxes and certain other debts you owe the governme	nt	
At least one of the debtors and another	Claims for death or personal injury while you were intoxicated		
☐ Check if this claim is for a community debt	Other. Specify		
Is the claim subject to offset?	_		
☑ No □ Yes			
2.3	\$6,839.00	\$6,839.00	\$0.00
IRS- Centralized Insolvency Op.	Last 4 digits of account number		
Priority Creditor's Name PO Box 7346			
Number Street	_ When was the debt incurred? 2010		
	 As of the date you file, the claim is: Check all that apply 	y .	
	_ ☐ Contingent ☐ Unliquidated		
Philadelphia PA 19101-7346 City State ZIP Code	□ Disputed		
City State ZIP Code Who incurred the debt? Check one.	Type of PRIORITY unsecured claim:		
Debtor 1 only	Domestic support obligations		
Debtor 2 only	Taxes and certain other debts you owe the governme	nt	
Debtor 1 and Debtor 2 only At least one of the debtors and another	☐ Claims for death or personal injury while you were intoxicated		
Check if this claim is for a community debt	Other. Specify		
Is the claim subject to offset?			
☑ No			
Yes			
2.4	\$4,085.00	\$4,085.00	\$0.00
IRS- Centralized Insolvency Op. Priority Creditor's Name	Last 4 digits of account number		
PO Box 7346	When was the debt incurred? 2009		
Number Street			
	 As of the date you file, the claim is: Check all that apply Contingent 	y.	
Philadalphia DA 10101 7040	Unliquidated		
Philadelphia PA 19101-7346 City State ZIP Code	Disputed		
Who incurred the debt? Check one.	Type of PRIORITY unsecured claim:		
Debtor 1 only	Domestic support obligations		
Debtor 2 only Debtor 1 and Debtor 2 only	Taxes and certain other debts you owe the governme Claims for death or personal injury while you were	nt	
At least one of the debtors and another	intoxicated		
☐ Check if this claim is for a community debt	Other. Specify		
Is the claim subject to offset?			
No Yes			

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Debtor 1 Trina A. Lloyd	Case number (if known) 17-10098-BFK
Part 2: List All of Your NONPRIORITY	Y Unsecured Claims
 Yes List all of your nonpriority unsecured claims if a creditor has more than one nonpriority unsecutype of claim it is. Do not list claims already inclied 	Claims against you? Submit this form to the court with your other schedules. In the alphabetical order of the creditor who holds each claim. Bured claim, list the creditor separately for each claim. For each claim listed, identify what buded in Part 1. If more than one creditor holds a particular claim, list the other creditors in insecured claims, fill out the Continuation Page of Part 2.
Bloomingdales/DSNB Nonpriority Creditor's Name POB 8218 Number Street Mason OH 45040 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes	Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card
Capital One Nonpriority Creditor's Name POB 30285 Number Street Salt Lake City UT 84130 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt	Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card

Is the claim subject to offset?

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Debtor 1 Trina A. Lloyd	Case number (if known)	BFK
Part 2: Your NONPRIORITY Unsecui	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.3		\$1,034.00
Cavalry Portfolio Service	Last 4 digits of account number	<u> </u>
Nonpriority Creditor's Name 500 Summit Lake Dr Ste 4A	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	☐ Contingent ☐ Unliquidated ☐ Unliquidated ☐ Contingent	
Valhalla NY 10595	Disputed	
ValhallaNY10595CityStateZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. ☐ Debtor 1 only	☐ Student loans	
Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
Check if this claim is for a community debt	Collection	
Is the claim subject to offset? No		
Yes		
4.4		00 000 04
Chase	Last 4 digits of account number	\$2,809.00
Nonpriority Creditor's Name	When was the debt incurred?	
POB 15298 Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☐ Unliquidated ☐ Disputed	
Wilmington DE 19850 City State ZIP Code		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
☐ Check if this claim is for a community debt	Credit Card	
Is the claim subject to offset?		
Ø No ☐ Yes		
4.5		\$985.00
Comcast Nonpriority Creditor's Name	_ Last 4 digits of account number	
POB 3006	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply. — Contingent	
	Unliquidated	
Southeastern PA 19398	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. ✓ Debtor 1 only	Student loans	
Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Debtor 1 and Debtor 2 only At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt	Other. Specify	
Is the claim subject to offset?	Utility	
No No		
Yes		

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Debtor 1 Trina A. Lloyd	Case number (if known) 17-10098-	-BFK
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.6		\$16,891.00
Federal Loan Svcing Credit	Last 4 digits of account number	
Nonpriority Creditor's Name POB 60610	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	☐ Contingent ☐ Unliquidated	
	☐ Disputed	
Harrisburg PA 17106 City State ZIP Code	- (NONDRIGHTY	
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	✓ Student loans ✓ Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
☐ Check if this claim is for a community debt	Other. Specify	
Is the claim subject to offset?		
☑ No		
Yes		
4.7		\$1,079.00
Kohls/Cap 1	Last 4 digits of account number	
Nonpriority Creditor's Name PO BOX 3115	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	Unliquidated Disputed	
Milwaukee WI 53201		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
☑ Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
☐ Check if this claim is for a community debt	✓ Other. Specify Credit Card	
Is the claim subject to offset?	ordan dara	
☑ No		
Yes		
4.8		\$713.00
Labcorp	Last 4 digits of account number	Ψ/10.00
Nonpriority Creditor's Name	When was the debt incurred?	
POB 2240 Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☐ Unliquidated ☐ Disputed	
Burlington NC 27216	— — — — — — — — — — — — — — — — — — —	
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt	✓ Other. Specify Medical	
Is the claim subject to offset?	INICUICAI	
No No		
Yes		

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Debtor 1 Trina A. Lloyd	Case number (if known) _ 17-10098-	BFK
Part 2: Your NONPRIORITY Unsecur	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.9		\$1,170.00
Macys	Last 4 digits of account number	
Nonpriority Creditor's Name 9111 Duke Blvd	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ ☐ Contingent ☐ Unliquidated	
	Disputed	
Mason OH 45040 City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts Other. Specify	
☐ Check if this claim is for a community debt	Credit Card	
Is the claim subject to offset?		
▼ No Yes		
4.10		#040.00
Medical Revenue Svc/Emory Univ Hosp	Last 4 digits of account number	\$943.00
Nonpriority Creditor's Name	When was the debt incurred?	
POB 1149 Number Street	As of the date you file, the claim is: Check all that apply.	
	Contingent	
	Unliquidated	
Sebring FL 33871	Disputed	
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	Student loans Obligations suit of a secretion agreement as discussed.	
Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt	Other. Specify	
Is the claim subject to offset?	Medical	
No No		
Yes		
4.11		\$813.00
Nordstrom	Last 4 digits of account number	Ψ013.00
Nonpriority Creditor's Name	When was the debt incurred?	
POB 6555 Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	Unliquidated Disputed	
Englewood CO 80155		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	Student loans Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt		
Is the claim subject to offset?	Ordan duru	
☑ No		
☐ Yes		

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Debtor 1 Trina A. Lloyd	Case number (if known) 17-10098-	BFK
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	em sequentially from the	Total claim
4.12		\$489.00
NOVEC	Last 4 digits of account number	<u> </u>
Nonpriority Creditor's Name POB 34795	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	Unliquidated Disputed	
Alexandria VA 22334		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
Check if this claim is for a community debt	Utility	
Is the claim subject to offset? No		
Yes		
4.13		\$2,374.00
Patients Acct Bur/Piedmont Hosp/Hollis C Nonpriority Creditor's Name	Last 4 digits of account number	
POB 279	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	☐ Contingent ☐ Unliquidated ☐ Unliquidated ☐ Contingent	
	Disputed	
Norcross GA 30091 City State ZIP Code	Type of NONDRIORITY unaccured eleims	
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim: Student loans	
Debtor 1 only	☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt	✓ Other. Specify Medical	
Is the claim subject to offset?	mouloui	
☑ No		
Yes		
4.14		¢4 000 00
	Last 4 digits of account number	\$1,000.00
Sychrony Bank/Old Navy Nonpriority Creditor's Name	When was the debt incurred?	
POB 965005 Number Street	As of the date you file, the claim is: Check all that apply.	
Number Street	Contingent	
	Unliquidated	
Orlando FL 32896	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	☐ Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
☐ Check if this claim is for a community debt	Credit Card	
Is the claim subject to offset?		
✓ No ☐ Yes		
□ ' ⁶³		

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Debtor 1 Trina A. Lloyd	Case number (if known)17-10098-I	BFK
Part 2: Your NONPRIORITY Unsecur	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.15		\$900.00
SYNCB/Gap	Last 4 digits of account number	
Nonpriority Creditor's Name POB 965005	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ ☐ Contingent ☐ Unliquidated	
	Disputed	
Orlando FL 32896 City State ZIP Code		
Who incurred the debt? Check one.	Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts Other. Specify	
☐ Check if this claim is for a community debt	Credit Card	
Is the claim subject to offset?		
▼ No Yes		
4.16		¢1 000 00
SYNCB/Lowes	Last 4 digits of account number	\$1,000.00
Nonpriority Creditor's Name	When was the debt incurred?	
POB 965005 Number Street	As of the date you file, the claim is: Check all that apply.	
	_ ☐ Contingent	
	Unliquidated	
Orlando FL 32896	Disputed	
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt		
Is the claim subject to offset?	Credit Card	
☑ No		
Yes		
4.17		\$600.00
SYNCB/Sam's Club	Last 4 digits of account number	
Nonpriority Creditor's Name	When was the debt incurred?	
POB 965005 Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☐ Unliquidated ☐ Disputed	
Orlando FL 32896		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	Student loans Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt		
Is the claim subject to offset?	Oreun Garu	
✓ No		
Yes		

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Debtor 1 Trina A. Lloyd	Case number (if known) _ 17-10098-B	3FK
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
TD Bank/Target Nonpriority Creditor's Name POB 673 Number Street Minneapolis MN 55440 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes	Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card	\$5,837.00
US Dept of Education Nonpriority Creditor's Name	Last 4 digits of account number When was the debt incurred?	\$25,191.00
POB 4222 Number Street	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed	
Iowa City City State ZIP Code Who incurred the debt? Check one. ✓ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? ✓ No Yes	Type of NONPRIORITY unsecured claim: ☑ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	

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Debtor 1 Trina A. Lloyd Case number (if known) 17-10098-BFK

Part 3: List Others to Be Notified About a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional parties to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

American Medical	Coll/Lab Co	р	On which	entry in Part 1 or F	Part 2	did you list the original creditor?
Name 4 Westchester Plz			Line	of (Check one):		Part 1: Creditors with Priority Unsecured Claims
Number Street						Part 2: Creditors with Nonpriority Unsecured Claims
			— Last 4 dig	gits of account num	ber	
Elmsford City	NY State	10523 ZIP Code				
Cavalry Portfolio S	ervice/HSB(On which	n entry in Part 1 or F	Part 2	did you list the original creditor?
Name 500 Summit Lake I	Or Ste 4A		Line	of (Check one):		Part 1: Creditors with Priority Unsecured Claims
Number Street						Part 2: Creditors with Nonpriority Unsecured Claims
	ALV.	10505	— Last 4 dig	gits of account num	ber	
Valhalla City	NY State	10595 ZIP Code				
Cavalry Portfolio S	ervice/HSB	:	On which	n entry in Part 1 or F	Part 2	did you list the original creditor?
Name 500 Summit Lake I	Or Ste 4A		Line	of (Check one):		Part 1: Creditors with Priority Unsecured Claims
Number Street						Part 2: Creditors with Nonpriority Unsecured Claims
			— Last 4 dig	gits of account num	ber	
Valhalla City	NY State	10595 ZIP Code				
Oity	Oldic	211 0000				
Central Credit Svc	s LLC/Lab C	orp	On which	entry in Part 1 or F	Part 2	did you list the original creditor?
Name 20 Corporate Hills	Dr		Line	of (Check one):		Part 1: Creditors with Priority Unsecured Claims
Number Street						Part 2: Creditors with Nonpriority Unsecured Claims
			— Last 4 diç	gits of account num	ber	
St. Charles City	MO State	63301 ZIP Code				
Chantel C. Espailla	nt/Lowes/Cav	/alrv	On which	n entry in Part 1 or F	Part 2	did you list the original creditor?
Name POB 1538		· •	 Line	of (Check one):	П	Part 1: Creditors with Priority Unsecured Claims
Number Street				e. (eneak eney.	_	Part 2: Creditors with Nonpriority Unsecured Claims
			— Last 4 did	gits of account num	ber	
Kennesaw City	GA State	30156 ZIP Code	`	•		
City	Oldio	2 0000				
Fulton County Sup	erior Ct/Cav	alry/Lowes	On which	entry in Part 1 or F	Part 2	did you list the original creditor?
Name 185 Central Ave SV	V Ste TG100		Line	of (Check one):		Part 1: Creditors with Priority Unsecured Claims
Number Street						Part 2: Creditors with Nonpriority Unsecured Claims
All			— Last 4 dig	gits of account num	ber	
Atlanta City	GA State	30303 ZIP Code				

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Debtor 1 Trina A. Lloyd Case number (if known) 17-10098-BFK List Others to Be Notified About a Debt That You Already Listed -- Continuation Page Part 3: IRS C/O US Attorney On which entry in Part 1 or Part 2 did you list the original creditor? Name of (Check one): Part 1: Creditors with Priority Unsecured Claims 2100 Jamieson Avenue Number Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number 22314 Alexandria City ZIP Code On which entry in Part 1 or Part 2 did you list the original creditor? IRS Honorable Loretta E. Lynch 10th St & Constitution Ave NW Rm 6313 of (Check one): Part 1: Creditors with Priority Unsecured Claims **Taxes** Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number Washington DC 20530 ZIP Code Midland Funding/GE CAP RETAIL/SYNC On which entry in Part 1 or Part 2 did you list the original creditor? Line of (Check one): Part 1: Creditors with Priority Unsecured Claims 8875 Aero Dr Ste 200 Number Street Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number San Diego CA 92123 State ZIP Code Northland Group/Bllomingdales On which entry in Part 1 or Part 2 did you list the original creditor? PO BOX 390846 of (Check one): Part 1: Creditors with Priority Unsecured Claims Number Street Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number Minneapolis MN 55439 ZIP Code Northstar Location Svcs/TD Bank On which entry in Part 1 or Part 2 did you list the original creditor? 4285 Genesee St Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Number Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number Cheektowaga NY 14225 City Portfolio Recovery/.GECRB/SYNC On which entry in Part 1 or Part 2 did you list the original creditor? of (Check one): Part 1: Creditors with Priority Unsecured Claims 120 Corporate Blvd, Ste 100 Number Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number

Norfolk

City

VΑ

23502

7IP Code

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Debtor 1 <u>Tr</u>	ina A. Lloyd		Case number (if known) 17-10098-BFK				
Part 3:	List Others to Be	Notified Ab	out a Debt That You Already Listed Continuation Page				
Portfolio Recovery/WFNNB			On which entry in Part 1 or Part 2 did you list the original creditor?				
Name	e Blvd, Ste 100		Line of (Check one): Part 1: Creditors with Priority Unsecured Claims				
Number Stree			Part 2: Creditors with Nonpriority Unsecured Claims				
No of alla		00500	—— Last 4 digits of account number				
Norfolk City	VA State	23502 ZIP Code					
	m GDC/Montclair F	POA	On which entry in Part 1 or Part 2 did you list the original creditor?				
Name 9311 Lee Ave			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims				
Number Stree	et		Part 2: Creditors with Nonpriority Unsecured Claims				
			Last 4 digits of account number 1 3 0 0				
Manassas City	VA State	20110 ZIP Code					
	redit/COMCAST		On which entry in Part 1 or Part 2 did you list the original creditor?				
Name 4120 Internati	ional Pkwy Ste 11	00	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims				
Number Stree			Part 2: Creditors with Nonpriority Unsecured Claims				
			Last 4 digits of account number				
Carrollton City	TX State	75007 ZIP Code					
The Bureaus	Inc/CAP 1		On which entry in Part 1 or Part 2 did you list the original creditor?				
Name 1717 Central	St		Line of (Check one): Part 1: Creditors with Priority Unsecured Claims				
Number Stree			Part 2: Creditors with Nonpriority Unsecured Claims				
		20001	Last 4 digits of account number				
Evanston City	IL State	60201 ZIP Code					
Total Card/Ca	avalry/HSBC		On which entry in Part 1 or Part 2 did you list the original creditor?				
Name 5109 S Broad	band Ln		Line of (Check one): Part 1: Creditors with Priority Unsecured Claims				
Number Stree			Part 2: Creditors with Nonpriority Unsecured Claims				
			—— Last 4 digits of account number				

Sioux Falls City

SD

57108

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Debtor 1	Trina A. Lloyd	Case number (if known)	17-10098-BFK

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

			Total claim
Total claims from Part 1	6a.	Domestic support obligations	6a. \$0.00
	6b.	Taxes and certain other debts you owe the government	6b. \$13,321.00
	6c.	Claims for death or personal injury while you were intoxicated	6c. \$0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	^{6d.} + \$0.00
	6e.	Total. Add lines 6a through 6d.	6d. \$13,321.00
			Total claim
Total claims	6f.	0. 11	
from Part 2	01.	Student loans	6f. \$42,082.00
from Part 2	6g.		6f. \$42,082.00 6g. \$0.00
from Part 2	6g.	Obligations arising out of a separation agreement or divorce	<u> </u>
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar	6g. \$0.00 6h. \$0.00

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Fill in this inf	ormation to ider	:		
Debtor 1	Trina First Name	A. Middle Name	Lloyd Last Name	
Debtor 2	i iiot ivaiiio	Wilder Hame	Lastivamo	
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Ba	nkruptcy Court for the	EASTERN DIS	TRICT OF VIRGINIA	
Case number (if known)	17-10098-BFK			Check if this i

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.

 Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Property* (Official Form 106A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease
 is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of
 executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

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Fill in this inf	ormation to ider			
Debtor 1	Trina First Name	A. Middle Name	Lloyd Last Name	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	
United States Ba	nkruptcy Court for the	EASTERN DIS	TRICT OF VIRGINIA	
Case number (if known)	17-10098-BFK			Check if this amended filing

Official Form 106H

Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

1.	Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.) ✓ No ✓ Yes
2.	Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.) ✓ No. Go to line 3. ✓ Yes. Did your spouse, former spouse, or legal equivalent live with you at the time? ✓ No ✓ Yes
3.	In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on <i>Schedule D</i> (Official Form 106D), <i>Schedule E/F</i> (Official Form 106E/F), or <i>Schedule G</i> (Official Form 106G). Use <i>Schedule D</i> , <i>Schedule E/F</i> , or <i>Schedule G</i> to fill out Column 2.

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

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		Do	ocument F	Page	e 31 of 5	4	
Fill in this inform	nation to identify	your case:					
Debtor 1	Trina	Α.	Lloyd				
200101	First Name	Middle Name	Last Name			Che	ck if this is:
Debtor 2						П	An amended filing
(Spouse, if filing)	First Name	Middle Name	Last Name				•
United States Bank	cruptcy Court for the:	EASTERN DI	STRICT OF VIR	GINIA	<u> </u>		A supplement showing postpetition chapter 13 income as of the following date:
Case number (if known)	17-10098-BFK			_			MM / DD / YYYY
Official Form 10	<u> </u>					_	WINT DD / TTTT
Schedule I: Yo	our Income						12/15
responsible for supplinclude information a about your spouse. I your name and case	lying correct information bout your spouse. If more space is nee	ation. If you are f you are separa ded, attach a se Answer every q	married and not ated and your spo parate sheet to th	filing ouse i	jointly, and s not filing	your : with y	Debtor 2), both are equally spouse is living with you, ou, ou, do not include information any additional pages, write
1. Fill in your emploinformation.	oyment		Debtor 1				Debtor 2 or non-filing spouse
If you have more		vment status	✓ Employed				☐ Employed
job, attach a sepa with information a	. ato page	yment status	■ Not employed	ed			Not employed
additional employ		ation	Self Employed	1 & 1 :	ndlord		_
Include part-time,	-	ation	oen Employed	<u> </u>	maiora		-
or self-employed		yer's name					
Occupation may i	nclude =						
student or homem applies.	p.o	yer's address	Number Street				Number Street
			City		State Zin C	odo.	City State 7in Code
	Have le	una amanlayad th	City		State Zip C	ode	City State Zip Code
		ong employed th					
Part 2: Give I	Details About Mo	onthly Income	<u> </u>				
Estimate monthly inc non-filing spouse unless			If you have noth	ing to	report for a	ny line	, write \$0 in the space. Include your
If you or your non-filing you need more space,			er, combine the info	ormati	on for all em	ıployeı	rs for that person on the lines below. If
					For Debtor	1	For Debtor 2 or non-filing spouse
	ss wages, salary, ar s). If not paid monthly			2.	\$	0.00	
3. Estimate and list	t monthly overtime p	ay.		3. 🖣	\$	0.00	
4. Calculate gross	income. Add line 2	+ line 3.		4.	\$	0.00	

Official Form 106l Schedule I: Your Income page 1

Deb	Trina A. Lloyd		Case num	iber (if known)	17-10098-BFK
			For Debtor 1	For Debtor 2 on non-filing spo	
	Copy line 4 here	4.	\$0.00		_
5.	List all payroll deductions:				
	5a. Tax, Medicare, and Social Security deductions	5a.	\$0.00		_
	5b. Mandatory contributions for retirement plans	5b.	<u>\$0.00</u>		_
	5c. Voluntary contributions for retirement plans	5c.	\$0.00		_
	5d. Required repayments of retirement fund loans	5d.	\$0.00		_
	5e. Insurance	5e.	\$0.00		_
	5f. Domestic support obligations	5f.	\$0.00	-	_
	5g. Union dues	5g.	\$0.00		_
	5h. Other deductions. Specify:	5h.•	+\$0.00		_
6.	Add the payroll deductions. Add lines $5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h$.	6.	\$0.00		_
7.	Calculate total monthly take-home pay. Subtract line 6 from line 4.	. 7.	\$0.00		_
8.	List all other income regularly received:	0.0	04.445.00		
	8a. Net income from rental property and from operating a business, profession, or farm	8a.	\$4,445.00_		_
	Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.				
	8b. Interest and dividends	8b.	\$0.00		
	8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive	8c.	\$0.00		_
	Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.				
	8d. Unemployment compensation	8d.	\$0.00		
	8e. Social Security	8e.	\$0.00		
	8f. Other government assistance that you regularly receive			•	_
	Include cash assistance and the value (if known) or any non- cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program)				
	or housing subsidies.	٥,	**		
	Specify:	8f.	\$0.00		_
	8g. Pension or retirement income	8g.	<u>\$0.00</u>		_
	8h. Other monthly income. Specify: C13 Pymt for Child Support Arrears	8h.	+ \$248.00		
	C13 Fyint for Clina Support Arrears		φ240.00		_
9.	Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	9.	\$4,693.00		_
10.	Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$4,693.00	·	= \$4,693.00
11.	State all other regular contributions to the expenses that you list in Include contributions from an unmarried partner, members of your house friends or relatives.			roommates, and	dother
	Do not include any amounts already included in lines 2-10 or amounts the		. ,	xpenses listed in	
	Specify:			1	1. +
12.	Add the amount in the last column of line 10 to the amount in line 11	I. The	result is the combined	d monthly 1	2. \$4,693.00
	income. Write that amount on the Summary of Your Assets and Liabilitie				<u> </u>
	if it applies.				Combined monthly income
13.	Do you expect an increase or decrease within the year after you file	this fo	rm?		y moonio
	No. None.				
	Yes. Explain:				

Official Form 106l Schedule I: Your Income page 2

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Debtor 1	Trina A. Lloyd		Case number (if known)	17-10098-BFK
8a. Attach	ed Statement (Debtor 1)			
		Business		
Gross Mo	onthly Income:			\$2,650.00
<u>Expense</u>		<u>Category</u>	Amount	
Total Mo	nthly Expenses			\$0.00
Net Mont	hly Income:			\$2,650.00

Official Form 106l Schedule I: Your Income page 3

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	=111 III UNIS INIONI								
		iation to laciti	fy your case:			Che	ck if this	is:	
	Debtor 1	Trina First Name	A. Middle Name	Lloyd Last Na			A suppl	ended filing lement showing	
	Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Na	me		chapter followin	13 expenses as g date:	s of the
	United States Bankr	uptcy Court for the:	EASTERN DIST	RICT OF \	/IRGINIA		MM / DI	D / YYYY	
	Case number (if known)	17-10098-BFK					IVIIVI / DI	<i>D</i> / 1111	
O	fficial Form 10	6J							
S	chedule J: Yo	ur Expense	S						12/15
co na	rrect information. If	more space is ne	eded, attach anothe wer every question.	r sheet to t	ing together, both ar his form. On the top				
			enoia						
1.	Is this a joint case	e?							
2.	□ No	ebtor 2 live in a se	eparate household? e Official Form 106J- No	2, Expenses	s for Separate Housel	nold of	f Debtor 2	2.	
	,	ä	Yes. Fill out this info	ormation	Dependent's relation		p to	Dependent's	Does dependent
	Do not list Debtor 1 Debtor 2.	i and	for each dependent.		Debtor 1 or Debtor	2		age	live with you? No Yes
	Do not state the de names.	ependents'							No
3.	Do your expenses expenses of peop yourself and your	ole other than	✓ No ☐ Yes						_
	Part 2: Estima	ate Your Ongoi	ng Monthly Expe	enses					
to		of a date after the		-	re using this form as supplemental Sche	_		-	
	clude expenses paid ch assistance and h		-	-				Your expens	ses
4.			enses for your reside any rent for the grour				4	1	
	If not included in								
	4a. Real estate ta	axes					4	ła	
	4b. Property, hom	neowner's, or renter	's insurance				4	4b.	
		nance, repair, and					4		
		association or con						4d.	\$53.00

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Det	otor 1 Trina A. Lloyd	Case number (if known)	<u>17-10098-BFK</u>
		Your e	expenses
5.	Additional mortgage payments for your residence, such as home equity loans	5.	
6.	Utilities:	-	
	6a. Electricity, heat, natural gas	6a.	
	6b. Water, sewer, garbage collection	6b.	
	6c. Telephone, cell phone, Internet, satellite, and	6c.	
	cable services	_	
	6d. Other. Specify: Cell Phone	6d.	\$175.00
7.	Food and housekeeping supplies	7	\$375.00
8.	Childcare and children's education costs	8	
9.	Clothing, laundry, and dry cleaning	9	\$100.00
10.	•	10	\$120.00
11.	•	11	\$210.00
12.	Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12	\$300.00
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13	\$100.00
14.	Charitable contributions and religious donations	14	\$100.00
15.	Insurance.		
	Do not include insurance deducted from your pay or included in lines 4 or 20.		
	15a. Life insurance	15a	\$100.00
	15b. Health insurance	15b	\$170.00
	15c. Vehicle insurance	15c	\$70.00
	15d. Other insurance. Specify:	15d	
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16	\$100.00
17.	Installment or lease payments:		
	17a. Car payments for Vehicle 1	17a	
	17b. Car payments for Vehicle 2	17b	
	17c. Other. Specify: Travel between VA & GA	17c	\$295.00
	17d. Other. Specify:		
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18	
19.	Other payments you make to support others who do not live with you. Specify:	19.	
20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.		
	20a. Mortgages on other property	20a	\$1,588.00
	20b. Real estate taxes	20b	
	20c. Property, homeowner's, or renter's insurance	20c	
	20d. Maintenance, repair, and upkeep expenses	20d	
	20e. Homeowner's association or condominium dues	20e	

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Debtor 1 T		Trina A. Lloyd	Case number (if known)	17-10098-BFK				
21.	Othe	r. Specify: Storage	21. +	\$200.00				
22.	Calc	ulate your monthly expenses.						
	22a.	Add lines 4 through 21.	22a	\$4,056.00				
	22b.	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2.	22b					
	22c.	Add line 22a and 22b. The result is your monthly expenses.	22c	\$4,056.00				
23.	Calc	ulate your monthly net income.	_					
	23a.	Copy line 12 (your combined monthly income) from Schedule I.	23a	\$4,693.00				
	23b.	Copy your monthly expenses from line 22c above.	23b. _ _	\$4,056.00				
	23c.	Subtract your monthly expenses from your monthly income. The result is your monthly net income.	23c	\$637.00				
24.	Do y	ou expect an increase or decrease in your expenses within the year after you f	ile this form?					
	For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?							
		No						
	Yes. Explain here: Renting out former residence and living with mother or other family. Personal car expenses high because she sometimes works as a model. She has car insurance expense because she drives family car.							

Official Form 106J Schedule J: Your Expenses page 3

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Fill in this information to identify your case:						
Debtor 1	Trina First Name	A. Middle Name	Lloyd Last Name			
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name			
United States Bankruptcy Court for the: EASTERN DISTRICT OF VIRGINIA						
Case number (if known)	17-10098-BFK					

Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Р	art 1: Summarize Your Assets	oage.
		Your assets Value of what you own
1.	Schedule A/B: Property (Official Form 106A/B)	\$335,000.00
	1a. Copy line 55, Total real estate, from Schedule A/B	
	1b. Copy line 62, Total personal property, from Schedule A/B	\$44,092.68
	1c. Copy line 63, Total of all property on Schedule A/B	\$379,092.68
Р	art 2: Summarize Your Liabilities	
		Your liabilities Amount you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$314,950.97
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$13,321.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	40- 404 00
	Your total liabilities	\$395,402.97
P	Your total liabilities Part 3: Summarize Your Income and Expenses	\$395,402.97
P.		

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Debtor 1		Trina A. Lloyd	Case number (if known)17-10098-BFK			
Р	art 4:	Answer These Questions for Administrative and Sta	atistical Records	_		
6.	Are yo	u filing for bankruptcy under Chapters 7, 11, or 13?				
	ш	o. You have nothing to report on this part of the form. Check this box es	and submit this form to the court with your other schedules.			
7.	What k	ind of debt do you have?				
		our debts are primarily consumer debts. Consumer debts are those mily, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for				
		Dur debts are not primarily consumer debts. You have nothing to re is form to the court with your other schedules.	eport on this part of the form. Check this box and submit			
8.		he Statement of Your Current Monthly Income: Copy your total curr Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line	¢4 604 06			

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

		Total claim						
Fro	From Part 4 on Schedule E/F, copy the following:							
9a.	Domestic support obligations. (Copy line 6a.)	\$0.00						
9b.	Taxes and certain other debts you owe the government. (Copy line 6b.)	\$13,321.00						
9c.	Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$0.00						
9d.	Student loans. (Copy line 6f.)	\$42,082.00						
9e.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$0.00						
9f.	Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$0.00						
9g.	Total. Add lines 9a through 9f.	\$55,403.00						

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Fill in this information to identify your case:							
Debtor 1	Trina	A.	Lloyd				
	First Name	Middle Name	Last Name				
Debtor 2							
(Spouse, if filing)	First Name	Middle Name	Last Name				
United States Bankruptcy Court for the: EASTERN DISTRICT OF VIRGINIA							
Case number	17-10098-BFK						
(if known)							

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below		
Did you pay or agree to pay someone who	NOT an attorney to help you fill out bankruptcy forms?	
☑ No		
Yes. Name of person	Attach Bankruptcy Petition Prep Declaration, and Signature (Offi	-
Under penalty of perjury, I declare that I hat true and correct.	read the summary and schedules filed with this declaration and that th	ey are
X /s/ Trina A. Lloyd Trina A. Lloyd, Debtor 1	X Signature of Debtor 2	
Date <u>02/14/2017</u> MM / DD / YYYY	Date MM / DD / YYYY	

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				Document	Page 40	of 54	1	
F	ill in this inf	ormation to ident	ify your	case:				
D	ebtor 1	Trina First Name	A. Middle Name	Lloyd e Last Name				
	ebtor 2 Spouse, if filing)	First Name	Middle Name	e Last Name				
,					OINHA			
			EASTER	N DISTRICT OF VIR	GINIA			
	ase number f known)	17-10098-BFK					Check if this amended fili	
<u>Of</u>	ficial Form	<u> 107</u>						
St	atement o	f Financial Aff	airs for	Individuals Fi	ling for Ba	nkru	ıptcy	04/16
cor you	rect informatiour name and ca	n. If more space is n se number (if known	eeded, atta). Answer	ach a separate sheet t	o this form. On	the to	equally responsible for support of any additional pages,	
1.	What is your	current marital status	-2					
١.	Married Married ✓ Not marrie		5 :					
2.	During the las	st 3 years, have you	lived anyw	here other than where	you live now?			
	✓ No ☐ Yes. List	all of the places you li	ved in the la	ast 3 years. Do not incl	ude where you li	ive nov	N.	
3.	(Community p						ity property state or territo ada, New Mexico, Puerto Rid	•
	✓ No ☐ Yes. Mak	e sure you fill out <i>Sch</i>	edule H: Yo	our Codebtors (Official F	Form 106H).			
P	art 2: Exp	olain the Sources	of Your	Income				
4.	Fill in the total	amount of income you	u received f	or from operating a bury from all jobs and all bus ne that you receive toge	inesses, includir	ng par		endar years?
	□ No ☑ Yes. Fill i	n the details.						
			De	ebtor 1			Debtor 2	
				rces of income eck all that apply.	Gross income (before deduct and exclusions	ions	Sources of income Check all that apply.	Gross income (before deductions and exclusions
	-	the current year unt for bankruptcy:	il 🗆	Wages, commissions, bonuses, tips	\$	0.00	Wages, commissions, bonuses, tips	
				Operating a business			Operating a business	
	the last calend	•		Wages, commissions, bonuses, tips	\$24,00	0.00	Wages, commissions, bonuses, tips	
(Ja	nuary 1 to Dece	mber 31, <u>2016</u>)		Operating a business			Operating a business	
	_	ear before that:		Wages, commissions, bonuses, tips	\$8,51	0.00	Wages, commissions, bonuses, tips	
(Ja	nuary 1 to Dece	mber 31, <u>2015</u>)		Operating a business			Operating a business	

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Deb	otor 1	Trina A. Lloyd		Case nu	mber (if known)17-100	98-BFK		
5.	Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security; unemployment; and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are in a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. No Yes. Fill in the details.							
	Debtor 1 De					Debtor 2		
			Sources of income Describe below.	Gross income from each source (before deductions and exclusions	Sources of income Describe below.	Gross income from each source (before deductions and exclusions		
		ry 1 of the current year until filed for bankruptcy:	Back Child Support	\$0.00				
		calendar year: December 31, 2016	Back Child Support	\$2,400.00				
		ndar year before that: December 31, 2015	Back Child Support	\$1,200.00				

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Deb	otor 1	Trina A. Lloyd		Case number (if known) 17-10098	-BFK			
P	art 3:	List Certain Pa	yments You Made Before You Fi	iled for Bankruntev				
3			tor 2's debts primarily consumer debts	• •				
.	□ No.	Neither Debtor 1 r		ebts. Consumer debts are defined in 11 U.S.C. §	101(8) as			
				ay any creditor a total of \$6,425* or more?				
		☐ No. Go to line	7.					
		Yes. List below total amo	v each creditor to whom you paid a total of unt you paid that creditor. Do not include	\$6,425* or more in one or more payments and the payments for domestic support obligations, such a ments to an attorney for this bankruptcy case.				
		* Subject to adjust	ment on 4/01/19 and every 3 years after th	nat for cases filed on or after the date of adjustmer	nt.			
	Yes.	Debtor 1 or Debto	r 2 or both have primarily consumer de	bts.				
			before you filed for bankruptcy, did you p	ay any creditor a total of \$600 or more?				
		No. Go to line	7.					
		creditor.		\$600 or more and the total amount you paid that oport obligations, such as child support and alimon s bankruptcy case.	ıy.			
7.	Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? <i>Insiders</i> include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations such as child support and alimony.							
	_	List all payments to						
3.	benefite	d an insider?	d for bankruptcy, did you make any paguaranteed or cosigned by an insider.	yments or transfer any property on account of a	a debt that			
	✓ No ☐ Yes.	List all payments the	at benefited an insider.					
P	art 4:	Identify Legal A	Actions, Repossessions, and Fo	reclosures				
9.	List all s		g personal injury cases, small claims actio	ny lawsuit, court action, or administrative processes, collection suits, paternity actions, su	•			
	□ No ▼ Yes.	Fill in the details.						
	e title		Nature of the case		Status of the case			
Μo	ntclair P	OA v. Trina Lloyd	Warrant in Debt Return Date: 2/15/2017	Prince William County GDC Court Name	Pending			
				9311 Lee Avenue Number Street	On appeal			
Cas	se number	GV17000345-00		Number Street	Concluded			
				Manassas VA 20110				
				City State ZIP Code				

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Debtor 1 Trina A. Lloyd		Case number (i	f known) _	17-10098-BF	<u>:К</u>
Case title	Nature of the case	Court or agency		State	us of the case
Montclair POA v. Trina Lloyd	Warrant in Debt	Prince William Co	ounty GD	С	
	Judgment 4/20/2016	Court Name			Pending
		9311 Lee Avenue			_
		Number Street			ш
Case number GV16001213-00					_ 🗹 Concluded
		Manassas	VA	20110	
		City	State	ZIP Code	_
		,			
Case title	Nature of the case	Court or agency		State	us of the case
Cavalry SPV I, LLC vs. Trina	Warrant in Debt	Fulton County Su	perior Ct		- □ Pending
Lloyd	Judgment August 18, 2016	Court Name			- Pending
		185 Central Ave S	SW Ste To	G100	_ 🔲 On appeal
Coop number 4484004CCF0		Number Street			— Canaludas
Case number <u>14MS016652</u>	_				Concluded
		Atlanta	GA	30303	
		City	State	ZIP Code	_
-	d for bankruptcy, did any creditor, incl or refuse to make a payment because y	-	institutior	ı, set off any	
Yes. Fill in the details.					
	for bankruptcy, was any of your prope eceiver, a custodian, or another official	•	an assigne	e for the bene	fit of
☑ No □ Yes					
Part 5: List Certain Gifts	s and Contributions				
13. Within 2 years before you file	d for bankruptcy, did you give any gifts	with a total value of mor	e than \$60	0 per person?	ı
✓ No✓ Yes. Fill in the details for e	ach gift.				
14. Within 2 years before you filed to any charity?	d for bankruptcy, did you give any gifts	or contributions with a t	otal value	of more than \$	600
✓ No✓ Yes. Fill in the details for e	ach gift or contribution.				

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Deb	otor 1	Trina A. Llo	oyd		Case number	r (if kn	own) 17-10098-	BFK
P	art 6:	List Cert	ain Lo	osses				
15.		1 year before lisaster, or ga			ptcy or since you filed for bankruptcy, did you lose	e anytl	ning because of th	eft, fire,
	□ No ☑ Yes	s. Fill in the d	etails.					
	cribe the	e property yo curred	u lost a	and how	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pe insurance claims on line 33 of Schedule A/B: Property of the loss	_		Value of property lost
Caı	r Fire				·	January 2016		
P	art 7:	List Cert	ain Pa	ayments or	Transfers			
16.					ptcy, did you or anyone else acting on your behalf nkruptcy or preparing a bankruptcy petition?	pay o	r transfer any prop	perty to
	Include	any attorneys	, bankr	uptcy petition p	oreparers, or credit counseling agencies for services re	equire	d for your bankrupto	cy.
	☐ No ✓ Yes	s. Fill in the d	etails.					
	v Office	es of Robert	R. We	ed	Description and value of any property transferred	d	Date payment or transfer was made	Amount of payment
		onville Rd., eet	Suite :	# 201	-		01/09/2017	\$1,780.00
Sta City	fford		VA State	22554 ZIP Code	-			
Ema	il or websi	te address			-			
Pers	on Who M	lade the Paymer	nt, if Not	You	-			
	neysha on Who V				Description and value of any property transferred	d	Date payment or transfer was made	Amount of payment
Num	nber Str	reet			-			\$20.00
City			State	ZIP Code	-			
Ema	il or websi	te address			-			

Person Who Made the Payment, if Not You

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Deb	tor 1	Trina A. Lloyd		Case number (if	known) 17-10098-	ВГК					
17.	anyone	1 year before you filed for bankrup who promised to help you deal w nclude any payment or transfer that	ith your creditors or to make			perty to					
	☑ No	s. Fill in the details.	you noted on mile to.								
18.		— Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?									
		Include both outright transfers and transfers made as security (such as granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.									
	✓ No Yes	:. Fill in the details.									
19.		10 years before you filed for banks a beneficiary? (These are often			trust or similar devic	ce of which					
	✓ No ☐ Yes	s. Fill in the details.									
P	art 8:	List Certain Financial Acc	ounts, Instruments, Sa	ife Deposit Boxes, an	d Storage Units						
20.	 Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No Yes. Fill in the details. 										
	_		Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved,	Last balance before closing or transfer					
NF		olal lootitution			or transferred						
ivam	e of Finan	cial Institution	XXXX	☑ Checking	March 2016	\$0.00					
Num	ber Str	eet		Savings Money market Brokerage Other							
City		State ZIP Code									
21.	-	now have, or did you have within urities, cash, or other valuables?	1 year before you filed for b	ankruptcy, any safe depo	sit box or other depo	ository					
	✓ No ☐ Yes	:. Fill in the details.									
22.	☑ No	ou stored property in a storage un	it or place other than your h	ome within 1 year before	you filed for bankru	otcy?					

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Deb	otor 1	Trina A. Lloyd		Case number (if known)17-10098-BFK
Р	art 9:	Identify Property You	Hold or Control for Someone Else	
23.	-	hold or control any property in trust for someone.	that someone else owns? Include any pr	operty you borrowed from, are storing for,
	✓ No ☐ Yes	. Fill in the details.		
Р	art 10:	Give Details About En	vironmental Information	
For	the purp	ose of Part 10, the following	definitions apply:	
	hazardou	is or toxic substance, wastes	, state, or local statute or regulation conc , or material into the air, land, soil, surfac olling the cleanup of these substances, w	, ,
			operty as defined under any environment ilize it, including disposal sites.	al law, whether you now own, operate, or
		, ,	n environmental law defines as a hazardo ant, contaminant, or similar item.	ous waste, hazardous substance, toxic
Rep	oort all no	otices, releases, and proceedi	ngs that you know about, regardless of w	when they occurred.
24.	Has any law?	y governmental unit notified y	ou that you may be liable or potentially li	able under or in violation of an environmental
	✓ No ☐ Yes	. Fill in the details.		
25.		ou notified any governmental	unit of any release of hazardous material	?
	✓ No ☐ Yes	. Fill in the details.		
26.	Have you	ou been a party in any judicial	or administrative proceeding under any	environmental law? Include settlements and
	✓ No ☐ Yes	. Fill in the details.		
Р	art 11:	Give Details About Yo	ur Business or Connections to An	y Business
27.	Within 4		nkruptcy, did you own a business or hav	e any of the following connections to any
		A member of a limited liability A partner in a partnership An officer, director, or managi	oyed in a trade, profession, or other activity, company (LLC) or limited liability partnershing executive of a corporation voting or equity securities of a corporation	
	_	None of the above applies. G Check all that apply above ar	o to Part 12. nd fill in the details below for each business.	
	na Lloyo iness Name		Describe the nature of the business Residential Rental of 15047 Holleysi Drive	Employer Identification number de Do not include Social Security number or ITIN. EIN:
Nun	nber Stre	eet	Name of accountant or bookkeeper	
				Dates business existed
				From To
City		State 7IP Code		

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Debtor 1 Trina A. Lloyd	Ca	Case number (if known) 17-10098-BFK		
Trina Lloyd Business Name	Describe the nature of the business Modeling, business admin, consulting	Employer Identification number Ulting Do not include Social Security number or ITIN.		
	Name of accountant or bookkeeper	EIN:		
Number Street				
		From	То	
City State ZIP Code				
28. Within 2 years before you filed for be all financial institutions, creditors, o	ankruptcy, did you give a financial statement rother parties.	to anyone about you	ur business? Include	
✓ No ✓ Yes. Fill in the details below.				

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Debtor 1	Trina A. Lloyd		_ Case number (if known)	17-10098-BFK
Part 12	: Sign Below			
that answe property b	ers are true and correct. I underst	of Financial Affairs and any attachn tand that making a false statement ruptcy case can result in fines up 571.	, concealing property, or obta	aining money or
	na A. Lloyd	x		
Trina A.	. Lloyd, Debtor 1	Signature of Debtor 2		
Date _	02/14/2017	Date	_	
Did you at	tach additional pages to Your Stat	tement of Financial Affairs for Indiv	viduals Filing for Bankruptcy	(Official Form 107)?
✓ No ☐ Yes				
Did you pa	ay or agree to pay someone who is	s not an attorney to help you fill ou	ut bankruptcy forms?	
☑ No				
_	lame of person			otcy Petition Preparer's Notice,
			Declaration, and Si	gnature (Official Form 119).

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B2030 (Form 2030) (12/15)

UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF VIRGINIA ALEXANDRIA DIVISION

In re	Trina A. Lloyd	Case No.	17-10098-BFK	
		Chapter	13	

	Chapter <u>13</u>
	DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:
	For legal services, I have agreed to accept
	Prior to the filing of this statement I have received
	Balance Due
2.	The source of the compensation paid to me was: ☐ Other (specify)
3.	The source of compensation to be paid to me is:
	✓ Debtor Other (specify)
4.	☑ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.
	☐ I have agreed to share the above-disclosed compensation with another person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.
5.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:
	a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
	b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;

c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;

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B2030 (Form 2030) (12/15)

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

02/14/2017 /s/ Robert R. Weed

Date

Robert R. Weed Law Office of Robert Weed 300 Garrisonville Rd #200 Stafford, VA 22554 Phone: (703) 335-7793 Bar No. 24646

/s/ Trina A. Lloyd

Trina A. Lloyd

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			D	<u>ocument</u>	<u> Page 51</u>	<u>0f 54</u>		
Fill	in this inf	ormation to identi	fy your case:			Check as	directed in lines 1	7 and 21:
Debt	tor 1		A. Middle Name	Lloyd Last Name		According to Statement:	the calculations require	ed by this
Debt (Spc	tor 2 ouse, if filing)	First Name N	Middle Name	Last Name			ole income is not deter U.S.C. § 1325(b)(3).	mined
Unite	ed States Ba	nkruptcy Court for the: <u>I</u>	EASTERN DIST	TRICT OF VIRO	GINIA	·	ole income is determin U.S.C. § 1325(b)(3).	ed
	e number nown)	17-10098-BFK				I —	mitment period is 3 ye	
(4. The com	mitment period is 5 ye	ars.
Offic	cial Form	122C-1				☐ Check if the	nis is an amended filinç	J
Cha	pter 13	Statement of Yo			ncome			
and	Calcula	tion of Commit	ment Perio	d				12/15
accur	ate. If more	nd accurate as possible space is needed, attactes. On the top of any a sculate Your Avera	ch a separate sh additional pages	eet to this form. , write your nam	Include the I	ine number to v	hich the additional	
1. V	Vhat is your	marital and filing statu	is? Check one o	nly.				
6	✓ Not marı	ried. Fill out Column A,	lines 2-11.	•				
	Married.	Fill out both Columns	A and B, lines 2-1	11.				
b A ir	cankruptcy cankruptcy cankruptcy can be suggested as a suggested a	erage monthly income ase. 11 U.S.C. § 101(the amount of your mor Do not include any income hat property in one colu	10A). For examp of the state of	le, if you are filinged during the 6 m than once. For e	g on Septembe onths, add the example, if bot	er 15, the 6-mont income for all 6 h spouses own t	h period would be Mare months and divide the ne same rental propert	ch 1 through total by 6. Fill
						Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
		rages, salary, tips, bon roll deductions).	uses, overtime,	and commissio	ns	\$0.00		_
3. A	Alimony and	maintenance payment	s. Do not includ	e payments from	a spouse.	\$0.00		
e re y	expenses of y egular contrib our depende	from any source which you or your dependent outions from an unmarrients, parents, and roomn ot include payments you	ts, including chi ed partner, memb nates. Do not inc	Id support. Includers of your hous	ıde ehold,	\$247.90		
5. N	let income fi	rom operating a busine	ess, profession,	or farm				
			Debtor 1	Debtor 2				
	Gross receipts leductions)	s (before all	\$2,652.06	-				
	Ordinary and expenses	necessary operating -	\$0.00		— Copy			
	let monthly in profession, or	ncome from a business,	\$2,652.06		here 👈	\$2,652.06		
ρ	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	IGIIII	See continua	tion page(s) fo	r details			

Deb	tor 1	Trina A. Lloyd			c	ase number (if k	(nown) <u>17-10098-B</u>	FK
						Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
6.	Net ir	ncome from rental and other	real property					
			Debtor 1	Debtor 2				
		receipts (before all ctions)	\$1,795.00					
	Ordin exper	ary and necessary operating -			Сору			
		nonthly income from rental or real property	\$1,795.00		here 👈	\$1,795.00		
7.	Intere	est, dividends, and royalties				\$0.00		
8.	Unen	ployment compensation				\$0.00		
		ot enter the amount if you conte it under the Social Security Act						
	Fo	or you		\$0.0	00			
	Fo	or your spouse			_			
9.		ion or retirement income. Do benefit under the Social Secu	•	ount received that		\$0.00		
	or inte	yments received as a victim of ernational or domestic terrorism ate page and put the total belo	n. If necessary, list o	-				
	Total	amounts from separate pages,	if any.		+		+	
11.	Add li	llate your total average mont nes 2 through 10 for each colu add the total for Column A to the	mn.	3.		\$4,694.96	+	= \$4,694.96 Total average monthly income
Pa	art 2:	Determine How to M	leasure Your De	eductions fron	n Income	•		monthly income
12.	Сору	your total average monthly i	ncome from line 11					\$4,694.96
13.	Calcu	late the marital adjustment.	Check one:					
		You are not married. Fill in 0 be You are married and your spou- You are married and your spou- Fill in the amount of the income of you or your dependents, suc han you or your dependents. Below, specify the basis for exc necessary, list additional adjust	se is filing with you. se is not filing with you listed in line 11, Col h as payment of the	ou. lumn B, that was I spouse's tax liabil and the amount of	ity or the s	pouse's support	of someone other	
	- -	f this adjustment does not appl	y, enter 0 below.					
	-							
	-	Гота!		+		\$0.00 Cop	y here →	\$0.00
14.	Your	current monthly income. Su	btract the total in line	e 13 from line 12.				\$4,694.96

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Debtor ¹	Trina A. Lloyd	Case number (if known	wn) 17-10098-BFK
5. Ca	Iculate your current monthly income for the year. For	ollow these steps:	
15	a. Copy line 14 here 🔷		\$4,694.96
	Multiply line 15a by 12 (the number of months in a ye	ear).	X 12
151	o. The result is your current monthly income for the year	r for this part of the form	\$56,339.52
6. Ca	lculate the median family income that applies to you.	Follow these steps:	
16	a. Fill in the state in which you live.	Virginia	
16	 Fill in the number of people in your household. 	2	
160	,		
	To find a list of applicable median income amounts, instructions for this form. This list may also be avail	• • • • • • • • • • • • • • • • • • • •	ate
7. Ho	w do the lines compare?		
178	· ·		•
471	under 11 U.S.C. § 1325(b)(3). Go to Part 3. Do		
171	 Line 15b is more than line 16c. On the top of p 11 U.S.C. § 1325(b)(3). Go to Part 3 and fill of On line 39 of that form, copy your current month 	ut Calculation of Your Disposable Income (
Part :	3: Calculate Your Commitment Period U	nder 11 U.S.C. § 1325(b)(4)	
8. Co	py your total average monthly income from line 11.		\$4,694.96
tha	duct the marital adjustment if it applies. If you are mat calculating the commitment period under 11 U.S.C. § 1 ome, copy the amount from line 13.		-
198	a. If the marital adjustment does not apply, fill in 0 on li	ne 19a	
191	b. Subtract line 19a from line 18.		\$4,694.96
	Iculate your current monthly income for the year. For		44.004.00
208	a. Copy line 19b		
	Multiply by 12 (the number of months in a year).		X 12
201	b. The result is your current monthly income for the year	r for this part of the form.	\$56,339.52
200	c. Copy the median family income for your state and si	ze of household from line 16c	\$70,976.00
1. Ho	w do the lines compare?		
$\overline{\mathbf{V}}$	Line 20b is less than line 20c. Unless otherwise order check box 3, <i>The commitment period is 3 years</i> . Go to	, , , , ,	orm,
	Line 20b is more than or equal to line 20c. Unless oth of this form, check box 4, <i>The commitment period is 5</i>	erwise ordered by the court, on the top of pag	ge 1
Dort	4. Sign Polow		
Part	4: Sign Below		
Ву	signing here, under penalty of perjury I declare that the	nformation on this statement and in any attac	hments is true and correct.
Y	/s/ Trina A. Lloyd	X	
^	Trina A. Lloyd, Debtor 1	Signature of Debtor 2	
	Date 2/14/2017	Date	
	MM / DD / YYYY	MM / DD / YYYY	

If you checked 17a, do NOT fill out or file Form 122C-2.

If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

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Debtor 1 Trina A. Lloyd Case number (if known) 17-10098-BFK

5. Net income from operating a business, profession, or farm (details):

Debtor 1 / Debtor 2	Description (if available)	Average Monthly Amount
<u>Debtor 1</u> Gross receipts (before all deductions) Ordinary and necessary operating expensions to monthly income from a business, pro	\$809.17 \$0.00 \$809.17	
Debtor 1	·	
Gross receipts (before all deductions)	\$1,842.89	
Ordinary and necessary operating expens	\$0.00	
Net monthly income from a business, pro-	fession, or farm	\$1,842.89